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*Detail of officers for duty in fruit ports.*

The following is a list of the acting assistant surgeons appointed for duty at the fruit ports of Central and South America during the close quarantine season : Paul Osterhout, Bocas del Toro, Colombia; D. W. Goodman, Port Limon, Costa Rica; W. K. Fort, Livingston, Guatemala; S. H. Backus, Puerto Cortez, Honduras; W. H. Carson, Blue-fields, Nicaragua; R. H. Peters, La Ceiba, Honduras; J. Grey Thomas, Belize, British Honduras.

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[Reports to the Surgeon-General United States Marine-Hospital Service.]

**ABSTRACT OF REPLIES RECEIVED IN REPLY TO REQUEST FOR REPORTS ON INFLUENZA (LA GRIPPE).**

[Continued from PUBLIC HEALTH REPORTS, Nos. 6, 7, 8, 9, 10, 11, 12, and 13.]

**ARIZONA—Nogales.**—La grippe has been prevalent from December 25, 1900, to February 1, 1901. The types have been catarrhal and gastro-intestinal. The number of cases has been 60. One case was followed by subacute nephritis. Mortality has been nil. Treatment has been dietary and symptomatic for gastric and intestinal types. Medicinal treatment has been principally with quinine and the coal-tar products.

**CALIFORNIA—Oakland.**—Cases of la grippe are not reported, and there is no data by which a history of them can be ascertained. The following shows the number of deaths from la grippe for the past fourteen months :

1900 : Month of January, none ; February, 1 ; March, 2 ; April, none ; May, none ; June, none ; July, 1 ; August, none ; September, none ; October, none ; November, 1 ; December, 3. 1901 : January, 3 ; February, none.

**GEORGIA—Augusta.**—La grippe has existed in mild form for the past few months. The number of cases can not be accurately estimated. The deaths have been very few. No precautions are known to have been taken to check the spread of the disease. The nature of the treatment is not stated.

**ILLINOIS—Cairo.**—Report of Asst. Surg. John Milton Holt, United States Marine-Hospital Service :

I have the honor to report herewith concerning the prevalence of influenza, as requested in Bureau circular letter dated January 18, 1901.

Blanks were prepared in this office and sent with letters requesting the information desired to 58 physicians in active practice in the southern part of Illinois and southeastern Missouri. Twenty-seven of these were completed and returned, supplying information for 16 different localities.

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At this hospital the first case presented itself January 5, 1901. Since that time there have been 14 cases, 7 in out-patient office and 7 in hospital.

Among the hospital cases there was 1 death seventeen days after onset and twelve days after admission; complicated by a right lobar pneumonia and myocarditis, verified by necropsy. He had passed the pneumonia crisis, and had normal temperature for five days, when the heart gave out. The treatment begins with patient in bed, where he is kept until fever subsides. Calomel and saline purge. Milk and restricted diet. Benzoate of soda .31 gm. q. 3h. Strychnine, if respiratory stimulant is needed. Bromide, acetanilid, and caffeine comp. for hemicrania. Antiseptics locally to mouth and throat. In majority of cases the type of disease has been mild. Systems affected in order of frequency are (1) nervous, (2) respiratory, (3) circulatory, (4) digestive. Salicylate of ammonia has given satisfaction in a few cases. Cold sponging is practiced when temperature passes 39.5° C. The effect of quinine is not constant; it is of marked benefit to some, inert to others.

In Cairo City 7 civil practitioners report 279 cases up to February 1, 1901. Total population, 12,225. Disease first appeared early part of December, 1900. One of the 7 physicians reports a mortality of 6 per cent, another 5 per cent; the remaining five report indefinitely. The type of disease is generally mild, except in the aged, and runs a short course unless complications supervene. These complications occur less frequently in patients treated in bed. Specialist report many eye and ear complications. I would estimate that at least 15 per cent of the city population has had the disease.

*Fredericktown, Mo.*—Two physicians report treating 360 patients. Disease appeared latter part of December. Type both mild and severe. Great variations in approximate percentages of involvement of nervous, circulatory, and respiratory system. Mortality of disease *per se*, or its sequelæ—1. But little variation from usual line of treatment.

*Charleston, Mo.*—Three physicians report 160 cases. Type, mild. Involvement of nervous system predominant. One reporter had 3 per cent of pneumonias, with no deaths; another had 5 per cent mortality, all from pneumonia. Treatment usually nothing but phenacetin, codiene, and pulv. ipecac et opii.

*Mound City, Ill.*—Two physicians report 336 cases. Type, mild to severe. Appearance of disease, November 15 to December 1. Mortality, 1 to 8 per cent. Involvement of respiratory system predominant. Pneumonia most frequent complication. Treatment, symptomatic, supportive, dietetic, etc.

*McClure, Ill.*—One physician reports 36 cases treated. Type, mild. Respiratory and nervous systems involved in all cases. Circulatory system involved in 95 per cent of cases. No deaths reported. Treatment, acetanilid, quinine, Dover's powder; otherwise symptomatic.

*Olive Branch, Ill.*—One physician reports 20 cases, mild. Mortality,

10 per cent. Disease appeared January 12. Nervous system involved in 50 per cent of cases; circulatory, 40 per cent; respiratory, 10 per cent. Treatment, rest in bed, etc.; quinine, salicylates, acetanilid, bromides, caffeine. Expectorants.

*Unity, Ill.*—One physician reports 150 cases, mild. Mortality, 3 per cent. Disease appeared January 1. Nervous, respiratory, and circulatory systems involved in all cases. Use of quinine and whisky emphasized.

*Jackson, Mo.*—One physician reports 25 cases, mild. One death. Respiratory system involved in 92 per cent of cases. Quinine, salicylates, salol, and phenacetin to counteract fever and pain. Chloride of ammonia, benzoate of soda, and syrup of wild cherry for bronchial and throat symptoms. Strychnine as a preventive of pneumonia. Whisky is ordered for the old, the feeble, and the drinker. Two cases complicated with gastritis; 1 with bilious diarrhea. For nervous symptoms bromide potassium and Dover's powder; stay in bed until fever abates, then indoors for several days. Reporter says: "I have noticed the following peculiarity this year: Following la grippe, the patient would have the clinical signs of pneumonia and physical examination would show negative. These cases I treated as I would catarrhal pneumonia with well-marked symptoms." Disease appeared January 1.

*Beechwood, Ill.*—Twenty-five cases reported; mild. No deaths. Disease appeared latter part of December. Mercurial purge, followed by quinine, acetanilid, and codein. Remain indoors, on light diet. Salicylates beneficial. Respiratory system alone affected.

*Potosi, Mo.*—Two physicians report disease began January 1 and ended January 7; mild. Number of cases, 50. Meningitis a complication. No deaths. All cases had involvement of respiratory system. Nothing unusual in treatment.

*Benton, Mo.*—Sixty cases; mild. Mortality, 5 per cent. Disease appeared January 20. Circulatory system involved in 90 per cent of cases. Antipyretics, opium, alkaline spray to nose and throat.

*St. Genevieve, Mo.*—Forty cases; severe. Mortality, 2½ per cent. Disease appeared January 5. Involvement of nervous system predominant. Treatment symptomatic. Hot packs to chest in children with respiratory involvement.

*Malden, Mo.*—Twelve cases; severe. Many deaths have occurred in community from pneumonia complications. All cases take respiratory form of disease. Disease appeared January 10. Four of these 12 cases had otitis media purulenta, and 1 of the latter terminated in mastoid abscess. Treatment symptomatic.

*Cape Girardeau, Mo.*—Seventy cases reported; mild. No deaths. Disease appeared January 10. Reporter says: "We have had a few cases of pneumonia following the cases. I have a few cases in old people that are not doing well; severe nervous and respiratory troubles." Usual treatment.

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*New Madrid, Mo.*—One hundred and thirty cases reported; severe. Mortality, 1 per cent. Involvement of nervous system in 65 per cent of all cases. Disease appeared December 28. Nothing unusual in treatment.

*Kennett, Mo.*—One hundred and twenty-five cases reported, both severe and mild. Mortality, 2 per cent. Disease appeared January 1. Usual treatment: Phenacetine, quinine, bromides, laxatives, hot baths, spray to nose, and tonics.

*Dexter, Mo.*—Seventy-five cases reported. More severe than usual. Disease appeared December 1. Only a small per cent of fatal cases. Eye, ear, and throat complications noted. Respiratory and nervous systems most often affected. Absolute confinement to a room of even temperature (never above 20° C.) the most important adjunct to medicinal treatment.

There is a lack of uniformity of view point evident in above abstracts received from physicians personally unknown to me. Some abstracts contain views not in harmony with those generally accepted.

**MASSACHUSETTS—Chelsea.**—The number of influenza cases reported is 128. The date of the first case was December 5, 1900. The type of the disease has been gastro-intestinal and rheumatic. The sanitary treatment has been disinfection of discharge; medicinal treatment: Quinine, the salicylates, and coal-tar products.

**NEW JERSEY—Hoboken—St. Mary's Hospital.**—In the treatment of la grippe at this hospital, considerable stress is laid upon general sanitary precautions. As far as possible la grippe patients are isolated, especially those which are well marked. Wards devoted to the care of pulmonary tubercular cases and other chronic troubles, the subjects of which offer a fertile field for the invasion of influenza bacilli, are carefully guarded against the entrance of la grippe patients. The rooms in which the la grippe cases are treated are large and well ventilated, and are as free from unnecessary fixtures as convenient. When the patients are removed the rooms are fumigated and the walls and floors are carefully wiped with carbolic solution. Excretions are received in disinfecting fluids. All cloths which have been in contact with patients when removed from room to room are sterilized. The medicinal treatment is largely symptomatic. The agents found most valuable have been quinine and salol, combined with coal-tar products. Local inflammations are treated by local measures.

**Jersey City Hospital and Dispensary.**—The treatment of la grippe in this institution has been with quinine and the coal-tar products. In cases where severe gastro-enteric disturbance was present small doses of codein were used to allay nausea. In one case a distressing and persistent cough yielded to small doses of heroin. Special medication, tonics, stimulants, etc., were given symptomatically. Hyperpyrexia was treated by the application of ice caps to the head and chest when indicated; cases of influenza were not isolated.

*Jersey City—St. Francis Hospital.*—(Prepared at request of board of health and vital statistics.)—The discovery of the bacillus by Pfeiffer as the specific cause of la grippe has modified to a great extent the sanitary treatment of this disease.

The patient suffering from influenza should be isolated at once, the room should be kept at about 70° F., and he should have at the same time a goodly supply of fresh air. All secretions from the mucous membranes (*i. e.*, throat and nose) thrown off by the patient should be got rid of as soon as practicable.

We have found in our treatment of this disease at this hospital that the prompt isolation of the patient is one of the main factors in preventing the spread of the disease. After the patient has recovered and is able to leave his room, the room and its contents should be thoroughly fumigated with formaldehyd gas, including bed clothing, hangings, and underclothing, and all other wearing apparel used by the patient during his illness.

Our local board of health is only too willing to aid us in this particular and will fumigate upon notice any apartment that has been vacated by a convalescent from influenza.

The prophylactic treatment consists of avoiding contagion. The avoidance of, as far as possible, ill-ventilated rooms, public buildings, riding in closed cars, ferryboats, etc., especially apartments that convalescents from this disease inhabit. The medicinal treatment to a great extent must be symptomatic.

At the beginning of the attack put the patient in bed at once, promote free diureses, diaphoresis, and catharsis by the use of proper remedies, administer opiates for the muscular pains, and treat the symptoms generally as they appear.

In the debilitated and senile the stimulating treatment is indicated almost from the beginning. The coal-tar products must be used with caution in this class of patients.

The diet should be light, in liquid form, and nourishing; milk, eggs, meat juices, and broths, and the liquid peptonoids seem especially good at this time.

During convalescence alcohol in some form, judiciously used, is of great benefit, as are also the various preparations of the hypophosphites, iron, strychnine, quinine, manganese, etc.

*OHIO—Chillicothe.*—La grippe made its appearance about the last week of November, 1900. A conservative estimate indicates that fully 25 per cent of the population has been affected. The mortality has been small and confined to the very young or aged. Three types of the disease have been noted, the bronchial, intestinal, and nervous. In the first, pneumonic complications have been frequent. The treatment has been purely symptomatic, mainly with coal-tar derivatives. The epidemic reached its maximum during the second week in January, since

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which time there has been a gradual abatement in the number of cases, until at this date (March 10) there are very few cases under treatment. No sanitary precautions were adopted.

OREGON—*Astoria*.—La grippe appeared about January 1, 1901, a few sporadic cases having occurred probably before that date. The epidemic gradually increased and was largely prevalent during February. It has been of a mild type, the anginous, respiratory, and rheumatoid forms predominating. Reliable statistics are not obtainable. No deaths due to influenza are known to have occurred, though the demise of some old people may have been caused by it. The treatment has been mostly symptomatic, with rest and tonics. Salicylate of soda, with coal-tar derivatives, and in some cases tincture of gelsemium and diuretics, seem to give prompt relief. A pure, warm, dry atmosphere indoors was recommended, but, excepting in a few cases, has been difficult to enforce, most patients continuing to walk about and seeking office treatment only.

PENNSYLVANIA—*Easton*.—The outbreak of la grippe began about January 5, 1901, and while nearly over, a few scattered cases still develop. No mortality is known to have been caused by it. The character of the disease was markedly high fever of short duration, with “break bone” symptoms and bronchial complications. There was not as much digestive derangement as in previous epidemics.

*Norristown*.—Reports of physicians on the number of cases of la grippe occurring during December, 1900, and January and February, 1901, vary materially, as reported by the board of health. About 3,000 cases may be estimated as having occurred. The deaths due directly to la grippe have not been over 10, but the depressing effects when complicated with other troubles have caused many deaths. The character of the disease has been catarrhal.

WASHINGTON—*Fort Simcoe*.—La grippe or influenza appeared in this locality, the Yakima Indian Reservation, about January 7, 1901. The atmospheric conditions were as follows: A snowfall of about 7 inches had lain for about one week, when a “chinook” or warm wind from the west came, accompanied by a heavy downpour of rain, lasting for two days.

The type has been mild, affecting the respiratory tract, principally bronchial, and 1 case resulted in broncho-pneumonia with recovery. A few cases occurred with digestive manifestations; none of nervous. Estimated number of cases on reservation, 100, principally among the Indians, though some whites suffered; no fatalities. As before stated, the type was mild, fever never very high.

Treatment: Confinement in bed, moist inhalations, salol, quinine, and stimulants. Stimulating cough mixtures where indicated. Speedy recovery in every case, except the one above noted.

The epidemic disappeared about February 1, and though atmospheric conditions have been favorable for bronchial troubles since that time, very few cases have been noticed.